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APPLICANTS

JAMES J. HOGAN, SAN DIEGO, CA;
 RICHARD D. SMITH, SAN DIEGO, CA;

** CONTINUING DATA *****

THIS APPLICATION IS A DIV OF 08/200,866 02/22/1994 PAT 5,541,308
 WHICH IS A CON OF 07/806,929 12/11/1991 ABN
 WHICH IS A CON OF 07/295,208 12/09/1988 ABN
 WHICH IS A 371 OF PCT/US87/03009 11/24/1987
 THIS APPLICATION 08/454,529 05/30/1995
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 WHICH IS A CIP OF 06/934,244 11/24/1986 ABN

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 08/26/1995

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	11	30	1
Verified and Acknowledged	<i>John Hogan</i> <i>MCH</i> Examiner's Signature Initials				

ADDRESS

CHARLES B CAPPPELLARI
 GEN-PROBE INCORPORATED
 PATENT DEPARTMENT
 10210 GENETIC CENTER DRIVE
 SAN DIEGO, CA 92121

TITLE

METHODS FOR DETERMINING THE PRESENCE OF NON-VIRAL ORGANISMS IN A SAMPLE

FILING FEE RECEIVED 950	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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